

FIG. 1

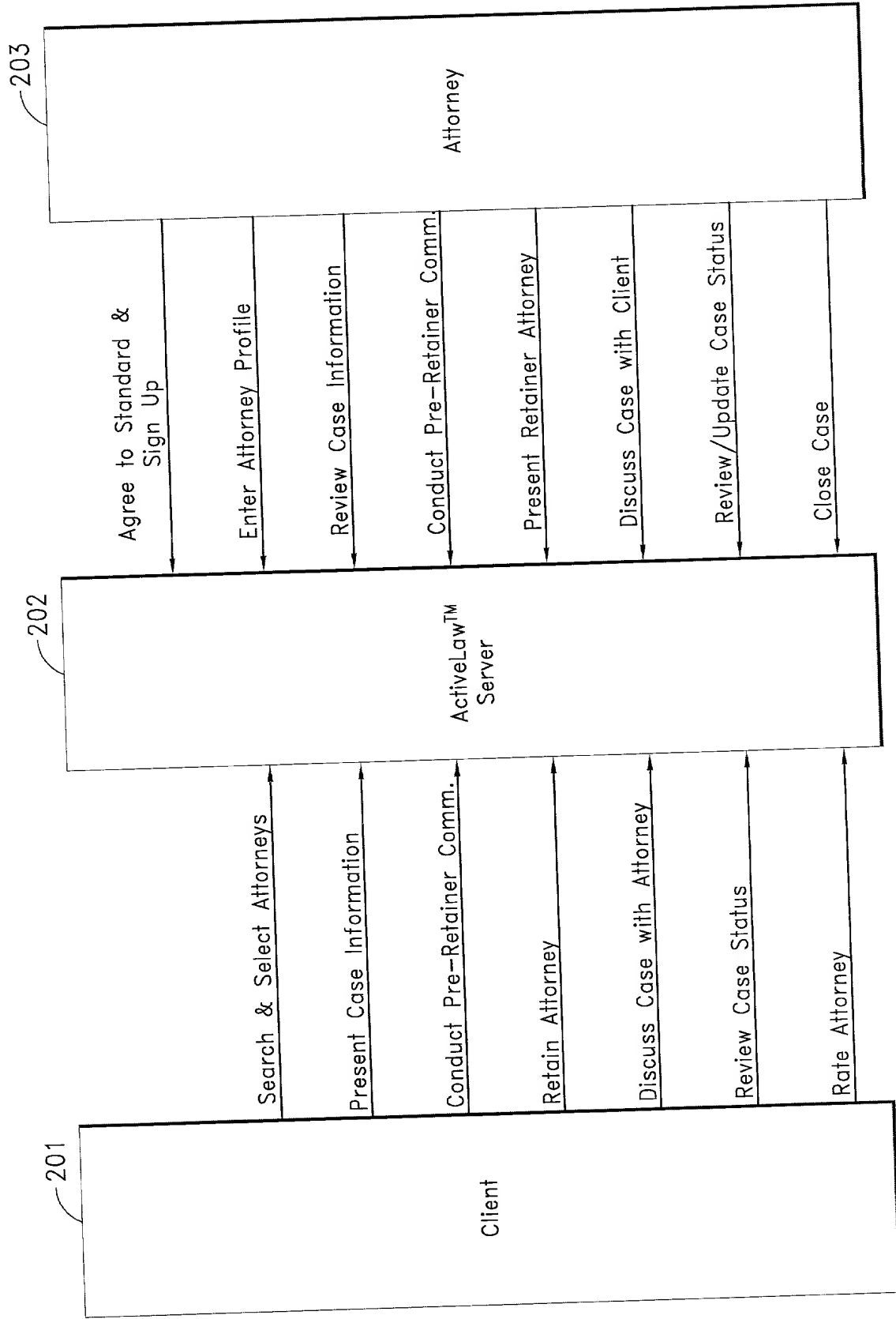


FIG. 2

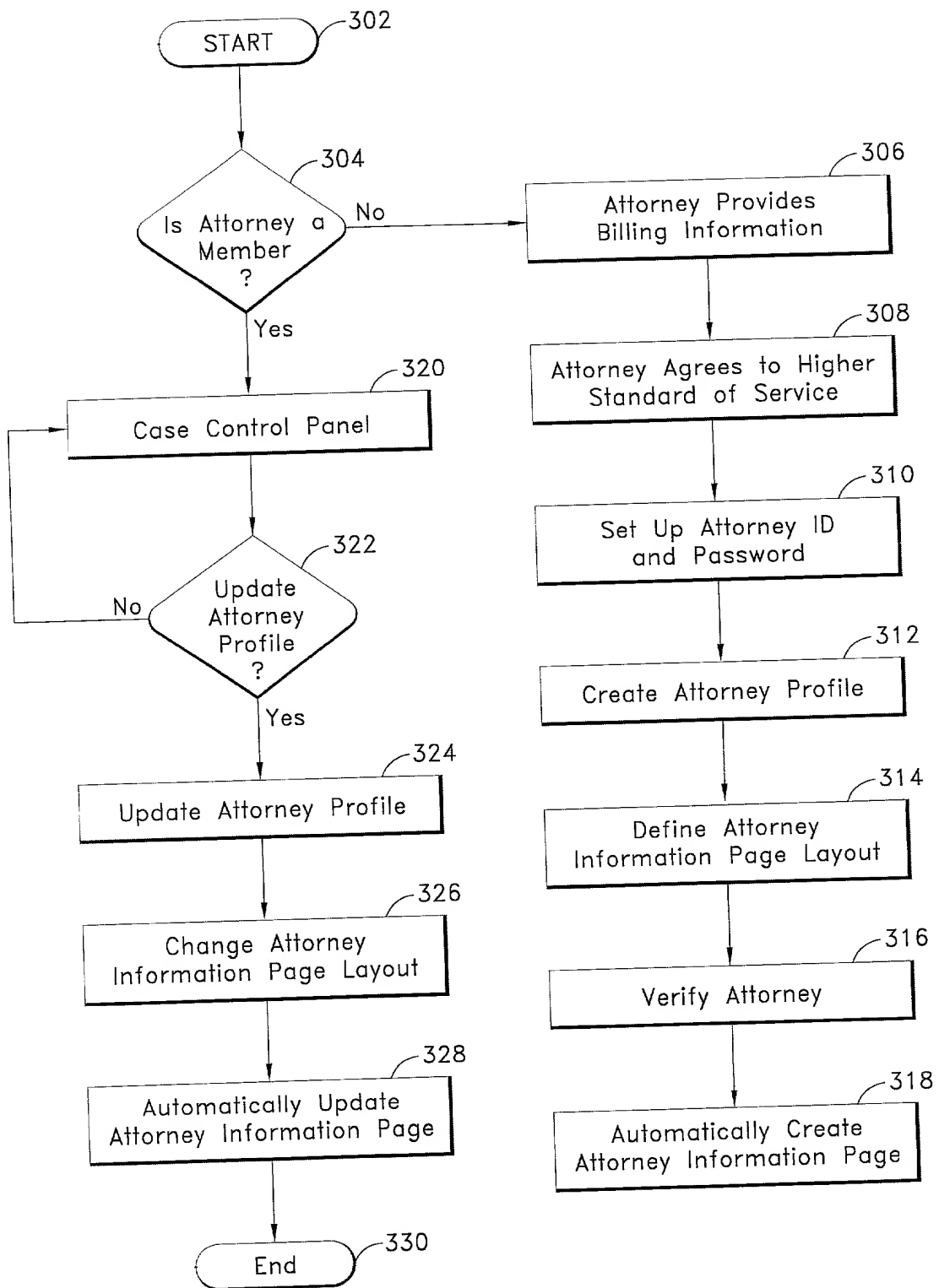


FIG. 3

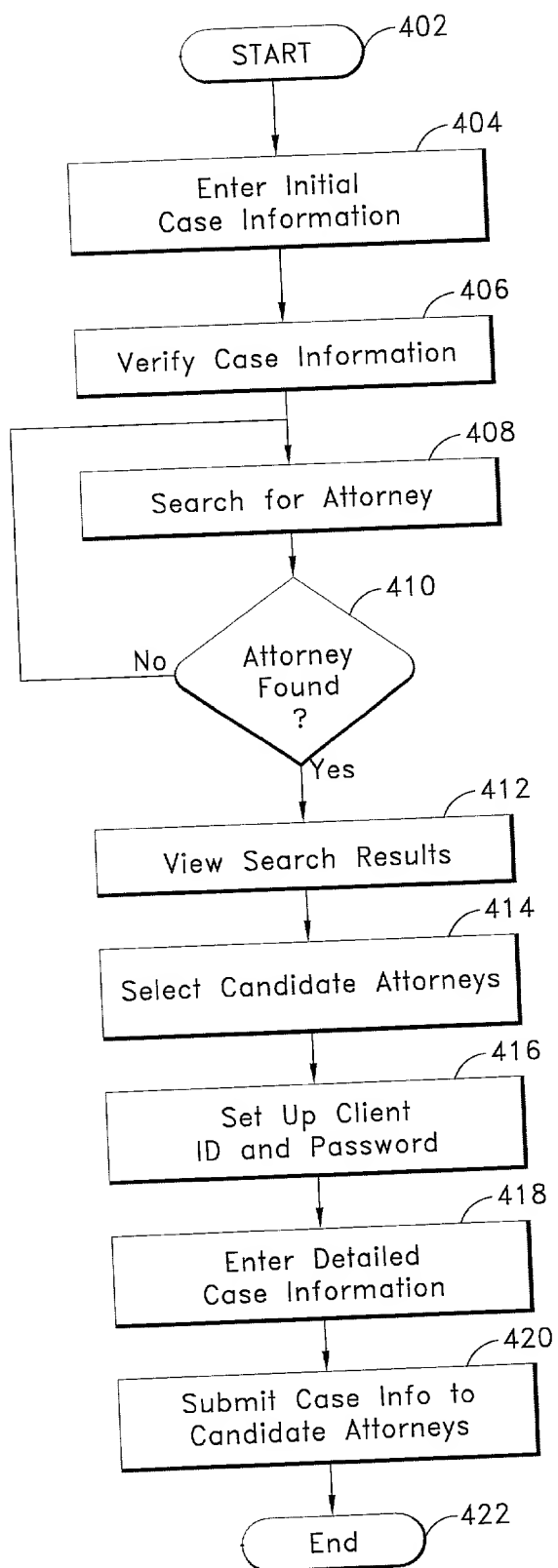


FIG. 4

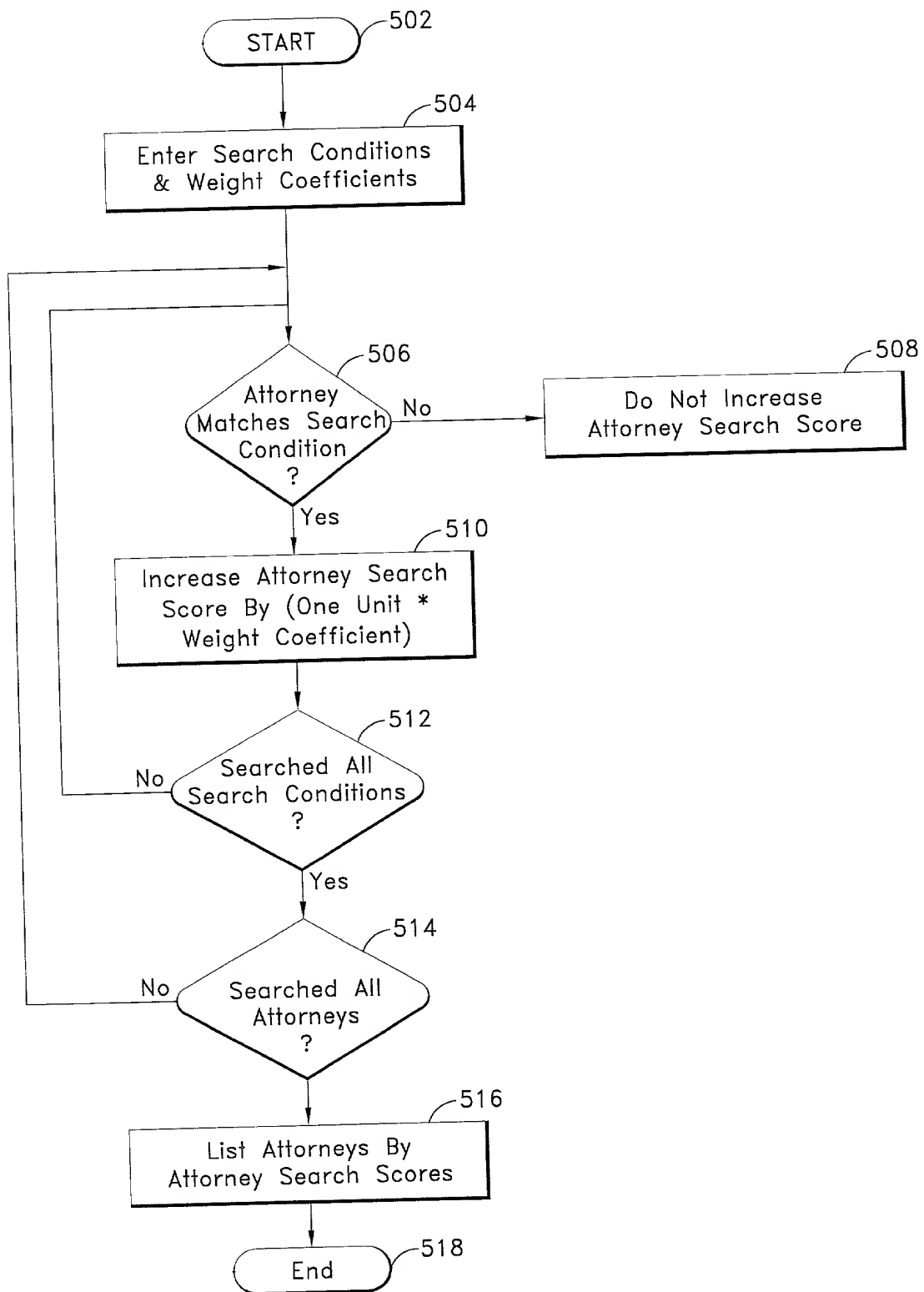


FIG. 5

```

EXAMPLE 1
For each attorney: /*For all attorney records */
  If attorney.state-licensed = "CA" then /* matches first search condition */
    Attorney.search-score = attorney.search-score + 100 * 0.6.
    /* increase search score by */
    /* unit number (100) * weight coefficient (0.6) */

  If attorney.office-location = "92612" then /* matches second search condition */
    Attorney.search-score = attorney.search-score + 100 * 0.3.
    /* increase search score by */
    /* unit number (100) * weight coefficient (0.3) */

  If attorney.language-spoken = "Spanish" then /* matches third search condition */
    Attorney.search-score = attorney.search-score + 100 * 0.1.
    /* increase search score by */
    /* unit number (100) * weight coefficient (0.1) */

End. /* end of loop */

For first 5 attorney by attorney.search-score /* find 5 attorneys with the highest score*/
  Display attorney.
End.

```

FIG. 6A

EXAMPLE 2

For each attorney where attorney.state-licensed = "CA":

Attorney.search-score = attorney.search-score + 100 * 0.6.

End.

For each attorney where attorney.office-location = "92612":

Attorney.search-score = attorney.search-score + 100 * 0.3.

End.

For each attorney where attorney.language-spoken = "Spanish":

Attorney.search-score = attorney.search-score + 100 * 0.1.

End.

For first 5 attorney by attorney.search-score

/* find 5 attorneys with the highest score*/

Display attorney.

End.

FIG. 6B

Prompt Text	Response Type	Response Set Data
Accident date:	Date	
Approximate accident time:	Time	
Location (city & state) where accident occurred:	Text field	
Number of people in your vehicle?	Dropdown list	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, more than 10
Describe what happened in the accident.	Text field	
Who was at fault in the accident and why?	Text field	
Did the police or other authority come to the scene?	Dropdown list	Yes, No, Maybe
Was anyone given a ticket?	Dropdown list	Yes, No, Maybe
If so, who got a ticket and for what?	Text field	
Were any witnesses to the accident identified?	Dropdown list	Yes, No, Maybe
If yes, please describe.	Text field	
Amount of damage to your vehicle:	Currency	
Type of damage to your vehicle:	Text field	
Amount of damage to other vehicle(s):	Currency	
Type of damage to your vehicle(s):	Text field	
Please describe your injuries in detail, including any permanent injuries.	Text field	
Please describe your medical treatment in detail, including the types of doctors/hospitals/specialists seen.	Text field	
Estimate medical costs to date:	Currency	
Estimated total expected costs for your medical treatment:	Currency	
Was anyone else injured?	Dropdown list	Yes, No, Maybe
If yes please describe.	Text field	
How much time did you lose from work?	Text field	
Describe type and amount of any other losses you have suffered related to this accident (not mentioned above).	Text field	
Have you previously agreed to be represented by any other lawyer related to this accident?	Dropdown list	Yes, No, Maybe
If yes please describe status.	Text field	
Have you negotiated with any insurance company or other party in connection with this accident?	Dropdown list	Yes, No, Maybe
If yes please describe status.	Text field	
Do you have any questions or is there any other information you think is important to share in connection with this possible case?	Text field	

FIG. 7

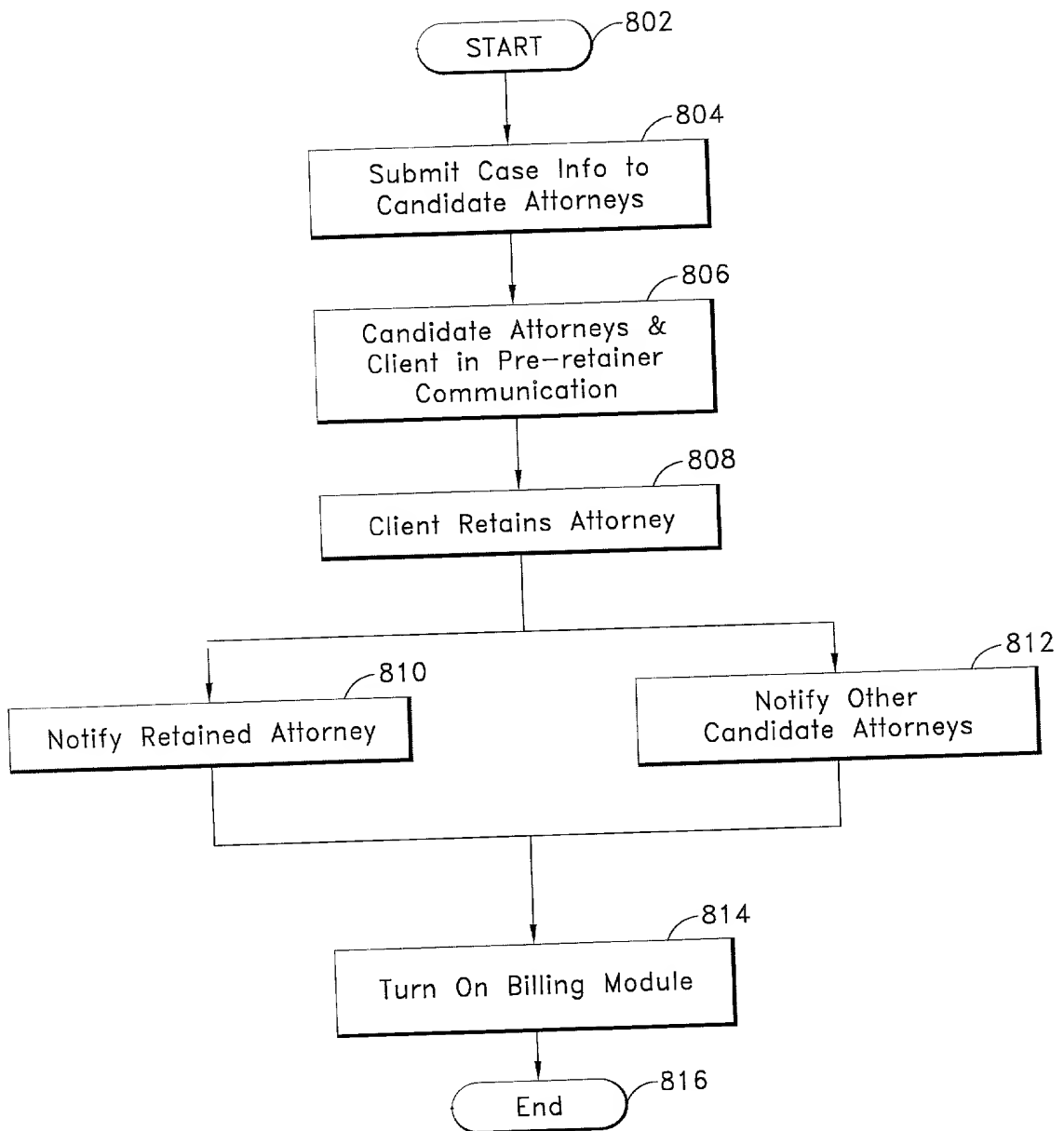


FIG. 8

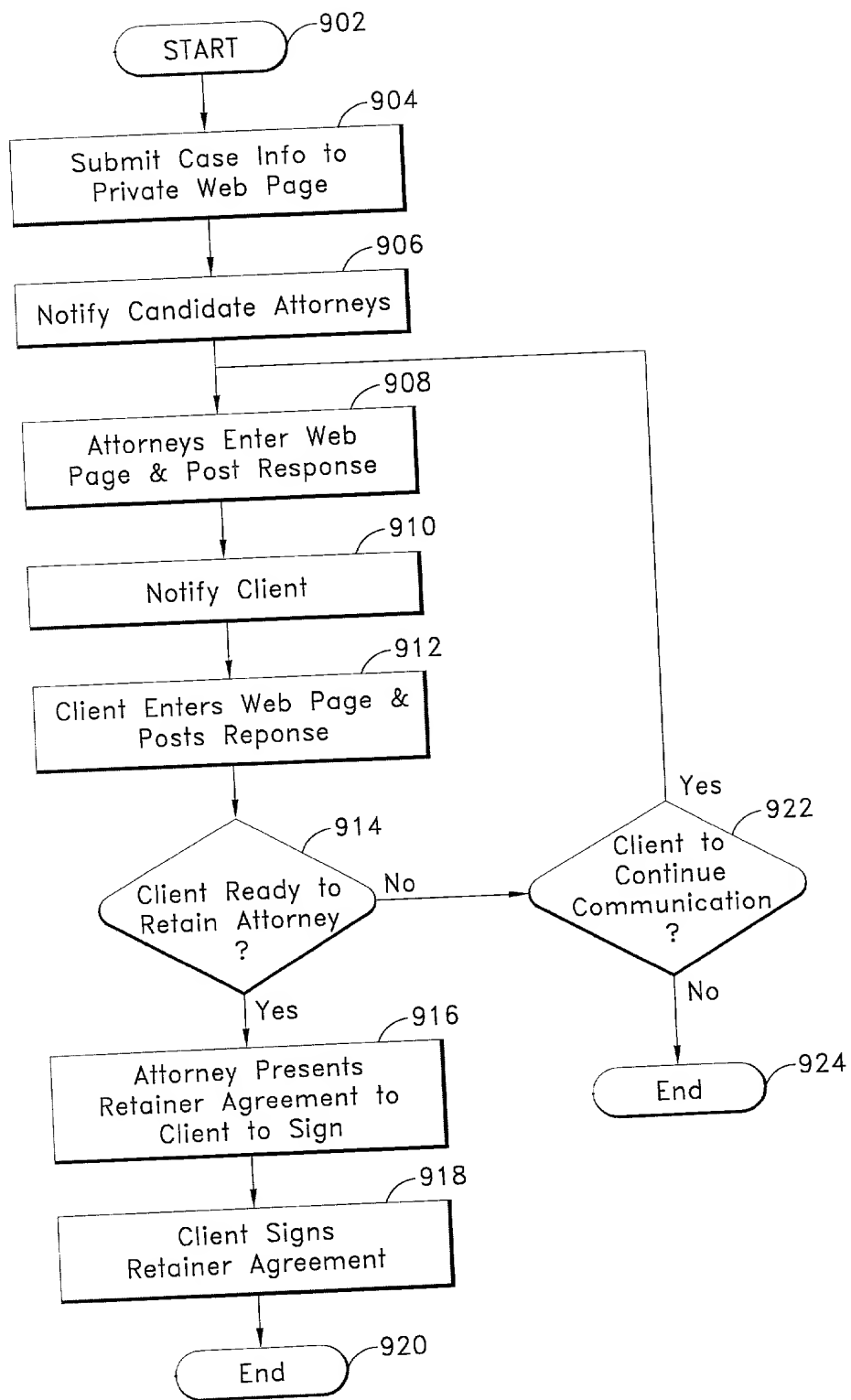



FIG. 9

1004



WHERE THE LAW NETS YOU MONEY™

CASE INFORMATION

CLIENT NAME: John A. Smith

ADDRESS: 123 Main St.

AGE: 35 SEX: Male

PHONE 1: 555-1234

PHONE 2: 555-5678

PHONE 3: OTHER:

OPPOSING PARTY 1: Jane Doe

OPPOSING PARTY 2: Acme Inc.

TYPE OF CASE: AUTOMOBILE ACCIDENT

DATE OF INJURY: 5/5/00

[CLICK HERE FOR MORE DETAILS](#)

CASE I.D. Smith 011

1002

YOU HAVE 3 UNREAD MESSAGES!

BANNER AD SPACE

DATE	FROM	TO	TEXT
6/4/00	Attorney A	Client	Here is the retainer agreement
6/3/00	Client	Attorney A	Please show me your retainer agreement
6/2/00	Attorney B	Client	I have litigated two toxic waste cases before
6/1/00	Client	Attorney B	Do you have experiences with toxic waste cases?

1014

1008

[ADD TEXT MESSAGE](#)

[SIGN RETAINER](#)

SEARCH FOR TEXT:

[GO](#)

[DISCLAIMER](#)

[FIND A LAWYER](#)

[LOG OUT](#)

1012

1016

FIG. 10

LawCenter Table

CODE	NAME
1001	Auto Accident
1002	Boat Accident
1003	Product Liability
1004	Slip and Fall
1005	Animal Bite

FIG. 11

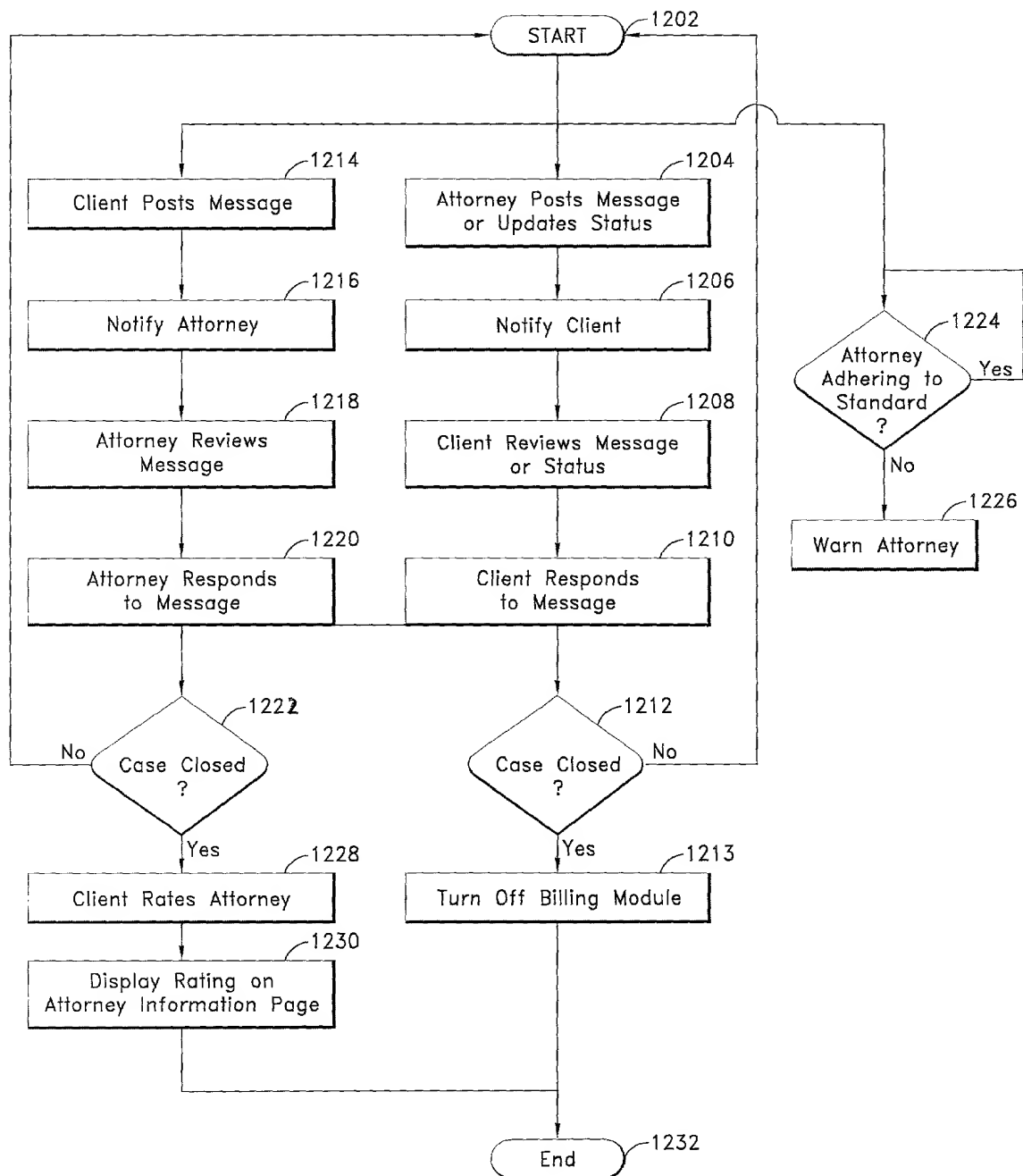


FIG. 12

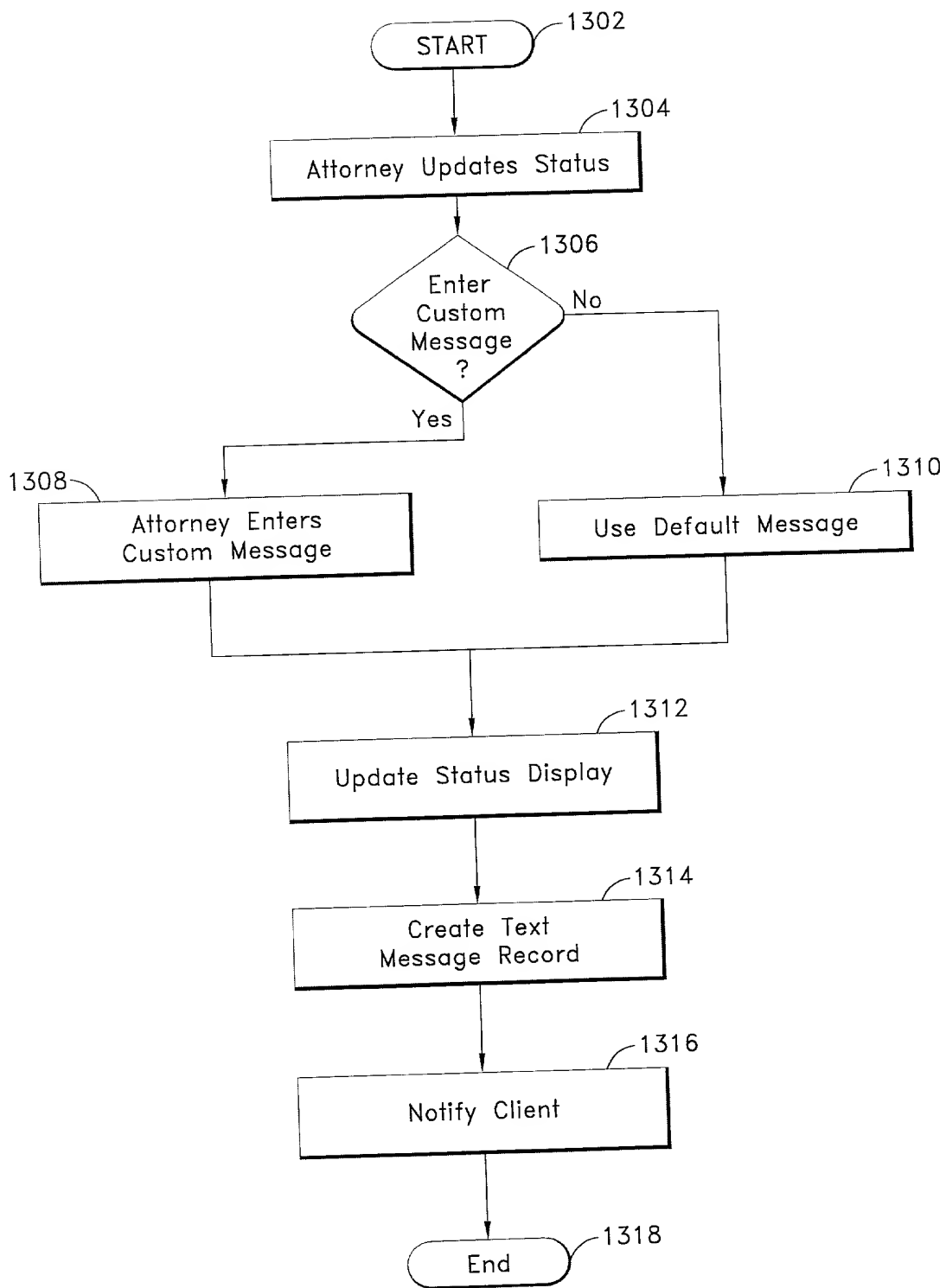


FIG. 13

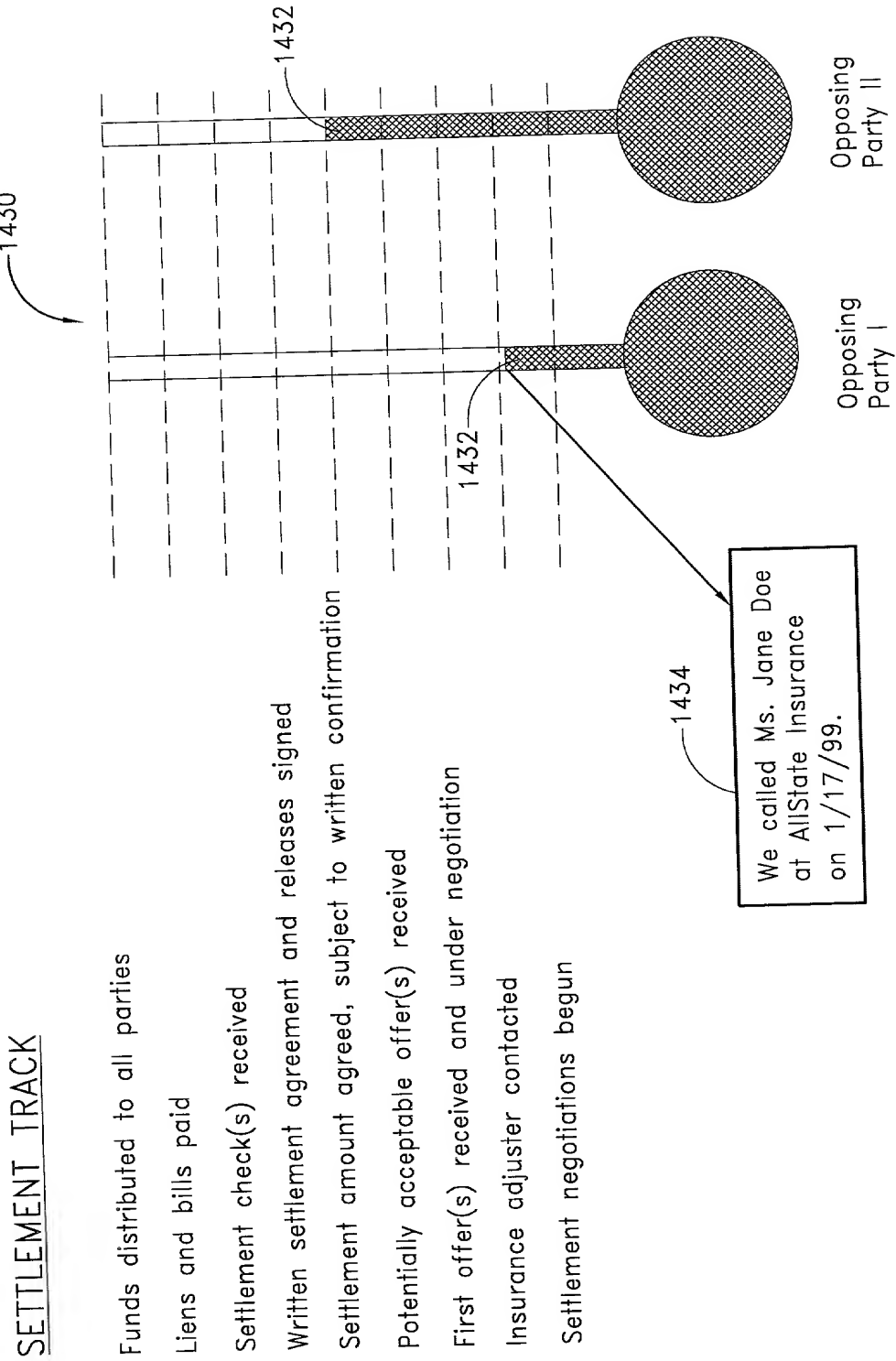


FIG. 14

WHERE THE LAW NETS YOU MONEY™

CASE INFORMATION

CLIENT NAME: John A. Smith
 ADDRESS: 123 Main St.
 AGE: 35 SEX: Male
 PHONE 1: 555-1234
 PHONE 2: 555-5678
 PHONE 3: OTHER:
 OPPOSING PARTY 1: Jane Doe
 OPPOSING PARTY 2: Acme Inc.

TYPE OF CASE: AUTOMOBILE ACCIDENT
 DATE OF INJURY: 5/5/00

CLICK HERE FOR MORE DETAILS

CLIENT TRUST ACCOUNT

DATE	ITEM	AMOUNT
6/1/00	Initial fee added	5,000
8/1/00	Expert expense paid	2,000
CURRENT BALANCE		3,000

UPDATE STATUS

ADD MESSAGE

CHANGE CASE INFORMATION

CLOSE CASE

SEARCH FOR TEXT:

GO

ACTIVE LAW.com

WHERE THE LAW NETS YOU MONEY™

CASE INFORMATION

CLIENT NAME: John A. Smith
 ADDRESS: 123 Main St.
 AGE: 35 SEX: Male
 PHONE 1: 555-1234
 PHONE 2: 555-5678
 PHONE 3: OTHER:
 OPPOSING PARTY 1: Jane Doe
 OPPOSING PARTY 2: Acme Inc.

TYPE OF CASE: AUTOMOBILE ACCIDENT
 DATE OF INJURY: 5/5/00

CLICK HERE FOR MORE DETAILS

CLIENT TRUST ACCOUNT

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CURRENT BALANCE		3,000

UPDATE STATUS

ADD MESSAGE

CHANGE CASE INFORMATION

CLOSE CASE

SEARCH FOR TEXT:

GO

ACTIVE LAW.com

WHERE THE LAW NETS YOU MONEY™

CASE INFORMATION

CLIENT NAME: John A. Smith
 ADDRESS: 123 Main St.
 AGE: 35 SEX: Male
 PHONE 1: 555-1234
 PHONE 2: 555-5678
 PHONE 3: OTHER:
 OPPOSING PARTY 1: Jane Doe
 OPPOSING PARTY 2: Acme Inc.

TYPE OF CASE: AUTOMOBILE ACCIDENT
 DATE OF INJURY: 5/5/00

CLICK HERE FOR MORE DETAILS

CLIENT TRUST ACCOUNT

DATE	ITEM	AMOUNT
6/1/00	Initial fee added	5,000
8/1/00	Expert expense paid	2,000
CURRENT BALANCE		3,000

UPDATE STATUS

ADD MESSAGE

CHANGE CASE INFORMATION

CLOSE CASE

SEARCH FOR TEXT:

GO

ACTIVE LAW.com

WHERE THE LAW NETS YOU MONEY™

CASE INFORMATION

CLIENT NAME: John A. Smith
 ADDRESS: 123 Main St.
 AGE: 35 SEX: Male
 PHONE 1: 555-1234
 PHONE 2: 555-5678
 PHONE 3: OTHER:
 OPPOSING PARTY 1: Jane Doe
 OPPOSING PARTY 2: Acme Inc.

TYPE OF CASE: AUTOMOBILE ACCIDENT
 DATE OF INJURY: 5/5/00

CLICK HERE FOR MORE DETAILS

CLIENT TRUST ACCOUNT

DATE	ITEM	AMOUNT
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8/1/00	Expert expense paid	2,000
CURRENT BALANCE		3,000

UPDATE STATUS

ADD MESSAGE

CHANGE CASE INFORMATION

CLOSE CASE

SEARCH FOR TEXT:

GO

ACTIVE LAW.com

WHERE THE LAW NETS YOU MONEY™

CASE INFORMATION

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 PHONE 2: 555-5678
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 OPPOSING PARTY 1: Jane Doe
 OPPOSING PARTY 2: Acme Inc.

TYPE OF CASE: AUTOMOBILE ACCIDENT
 DATE OF INJURY: 5/5/00

CLICK HERE FOR MORE DETAILS

CLIENT TRUST ACCOUNT

DATE	ITEM	AMOUNT
6/1/00	Initial fee added	5,000
8/1/00	Expert expense paid	2,000
CURRENT BALANCE		3,000

UPDATE STATUS

ADD MESSAGE

CHANGE CASE INFORMATION

CLOSE CASE

SEARCH FOR TEXT:

GO

ACTIVE LAW.com

WHERE THE LAW NETS YOU MONEY™

CASE INFORMATION

CLIENT NAME: John A. Smith
 ADDRESS: 123 Main St.
 AGE: 35 SEX: Male
 PHONE 1: 555-1234
 PHONE 2: 555-5678
 PHONE 3: OTHER:
 OPPOSING PARTY 1: Jane Doe
 OPPOSING PARTY 2: Acme Inc.

TYPE OF CASE: AUTOMOBILE ACCIDENT
 DATE OF INJURY: 5/5/00

CLICK HERE FOR MORE DETAILS

CLIENT TRUST ACCOUNT

DATE	ITEM	AMOUNT
6/1/00	Initial fee added	5,000
8/1/00	Expert expense paid	2,000
CURRENT BALANCE		3,000

UPDATE STATUS

ADD MESSAGE

CHANGE CASE INFORMATION

CLOSE CASE

SEARCH FOR TEXT:

GO

ACTIVE LAW.com

WHERE THE LAW NETS YOU MONEY™

CASE INFORMATION

CLIENT NAME: John A. Smith
 ADDRESS: 123 Main St.
 AGE: 35 SEX: Male
 PHONE 1: 555-1234
 PHONE 2: 555-5678
 PHONE

FIG. 15

ATTORNEY PROFILE TABLE

Key Field?	Field Name	Accessible by Client?
Yes	Attorney ID	Yes
	Attorney Password	
	Attorney Name	Yes
Yes	Attorney Email Address	Yes
	Office Location	Yes
	Zip Code	Yes
	States Licensed	Yes
	Law Firm Name	Yes
	LawCenter I	Yes
	LawCenter II	Yes
	LawCenter III	Yes
	LawCenter IV	Yes
	Law Practice Description	Yes
	Errors & Omissions Insurance?	Yes
	Pricing Policy	Yes
Yes	Attorney Information Page ID	
	Credit Card Number	
	Credit Card Expiration Date	
	Credit Card Name	
	Date of Birth	Yes
	Profile Verified & Approved	

FIG. 16

1702

ATTORNEY RATING TABLE

Key Field?	Field Name
Yes	Attorney ID
Yes	Case ID
Yes	Attorney Name
	Attorney Responsiveness Rating
	Attorney Trustworthiness Rating
	Attorney Competence Rating
	Overall Satisfaction Rating
	Client Gender
	Client Age Level
	Client Income Level
	Client Education Level
	Client Legal Knowledge Level
	LawCenter of the Case
	Client Comment

FIG. 17

INITIAL CASE TABLE

Key Field?	Field Name
Yes	Client Name
Yes	Client ID
	Client Address
	LawCenter of Case
	Client Email Address
	Client Age

1802

FIG. 18

FIG. 19

1902

DETAILED CASE TABLE

Key Field?	Field Name
Yes	Client ID
Yes	Client Name
Yes	Case ID
	Injured Party Name
	Injured Party Age
	Injury date
	Relation to Injured Party
	Detail Description of Case
	Insurance Information
	First Candidate Attorney ID
	First Candidate Attorney Name
	Second Candidate Attorney ID
	Second Candidate Attorney Name
	Third Candidate Attorney ID
	Third Candidate Attorney Name
	Client Gender
	Client Education Level
	Client Income Level
	Client Legal Knowledge Level
	LawCenter of the Case
	Search Conditions & Weight Coefficients Entered
	Retainer Approved

FIG. 19

2002

CASE STATUS TABLE

Key Field?	Field Name
Yes	Case ID
Yes	Retained Attorney ID
Yes	Retained Attorney Name
Yes	Client ID
Yes	Client Name
	Trust Account Balance
	Attorney Last Update Date
	Attorney Last Review Date
	Hours Attorney Spent on Case
	Retainer File Location
	Preliminary Track Case Status Code
	Settlement Track Case Status Codes
	Litigation Track Case Status Codes
	List of Warning Messages Seen
	List of Agreements Agreed To
	Case Communication Start Date
	Case Communication End Date

FIG. 20

CASE STATUS CODE TABLE

2102

2104

CASE STATUS CODE	CASE STATUS DESCRIPTION	THERMOMETER "TEMPERATURE"
201	Settlement Negotiations Begin	10
202	Insurance Adjuster Contacted (if applicable)	20
203	First Offer(s) Received and being negotiated	30
204	Potentially Acceptable Offer(s) Received	40
205	Settlement Amount Agreed, subject to written confirmation	50
206	Written Settlement Agreement and Releases Received	60
207	Written Settlement Agreement and Releases Signed	70
208	Check(s) Received	80
209	Liens and Bills Paid	90
210	Funds Disbursed to All Parties	100
211	Funds Added to Trust Account	N/A
212	Expenses Deducted from Trust Account	N/A

FIG. 21

TEXT MESSAGE TABLE

Key Field?	Field Name
Yes	Case ID
Yes	Date
Yes	Time
Yes	Message Un-read?
	Author ID
	Recipient ID
	Message Text

2202

2204

2206

2208

2210

2212

FIG. 22

CASE CONTROL PANEL OF ATTORNEY DOE

CASE STATUS	CLIENT NAME(s)	CASE ID	DAY'S SINCE LAST COMM.	UNREAD MESSAGES?	HYPERLINK
POTENTIAL NEW	SMITH, JOHN	100001	3	YES	GO TO WEB PAGE
POTENTIAL NEW	SMITH, MARY	100002	7	NO	GO TO WEB PAGE
OPEN	CLARK, RAY	100003	2	YES	GO TO WEB PAGE
OPEN	GOMEZ, ANTHONY	100004	10	NO	GO TO WEB PAGE
CLOSED	WANG, HARRY	100005	1	NO	GO TO WEB PAGE
	GOLDSTEIN, ANN				

FIG. 23

RATING INFORMATION OF ATTORNEY DOE

	Overall Satisfaction	Responsiveness	Trustworthiness	Competence	Number of Raters
All Raters	4.2	3.9	4.6	4.2	5
Male	4.25	4.13	4.63	4.25	4
Female	4	3	4.5	4	1
Legal Knowledge: Low	4.75	4.25	4.75	4.25	2
Legal Knowledge: Medium	4	3.5	4.5	3.75	2
Legal Knowledge: High	3.5	4	4.5	5	1
Case Specialty: Auto Accident	4.17	3.83	4.5	4.5	3
Case Specialty: Product Liability	4.5	4	5	4	1
Case Specialty: Others	4	4	4.5	3.5	1

[CLICK HERE TO READ CLIENT COMMENTS.](#)

FIG. 24

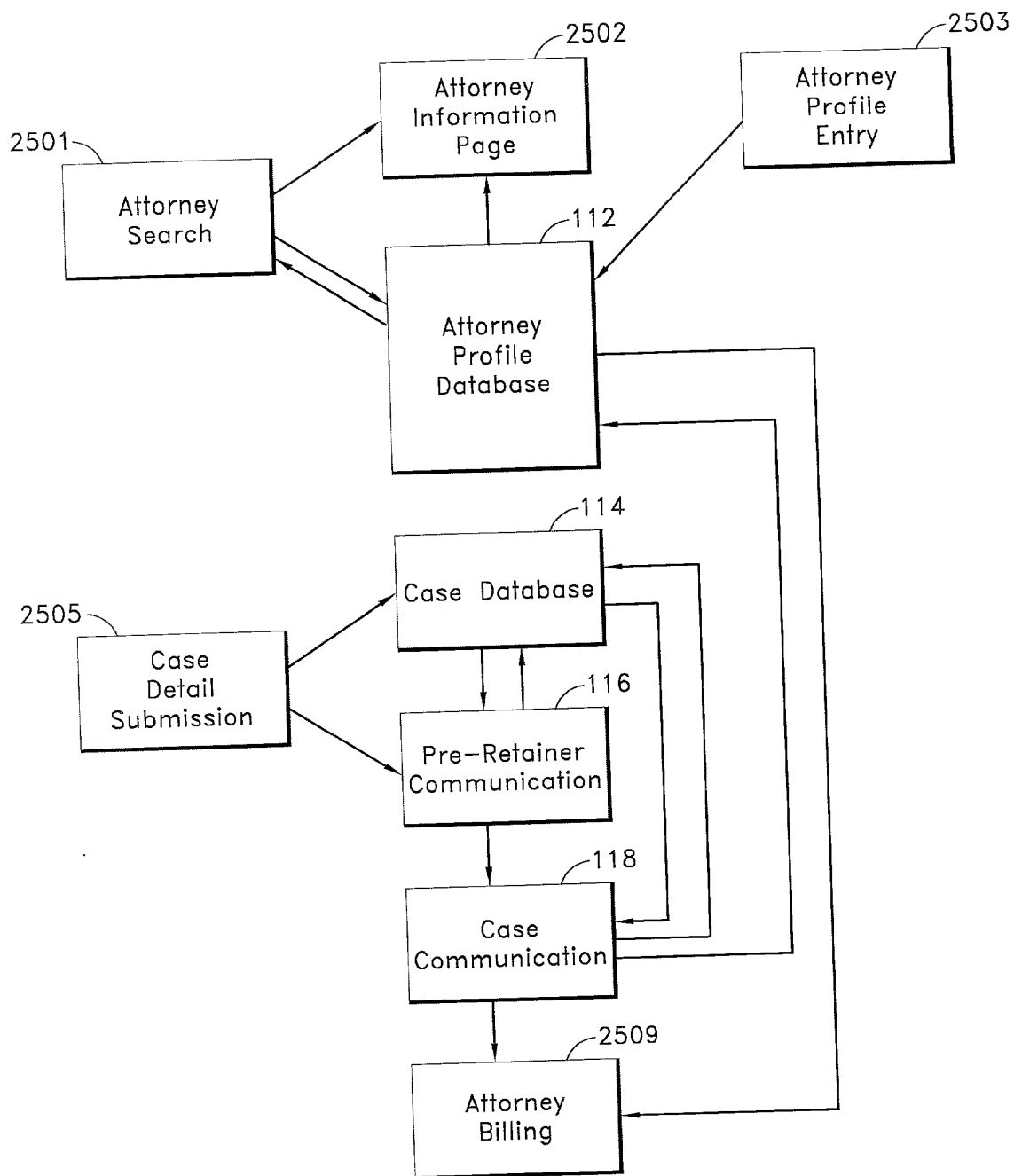


FIG. 25

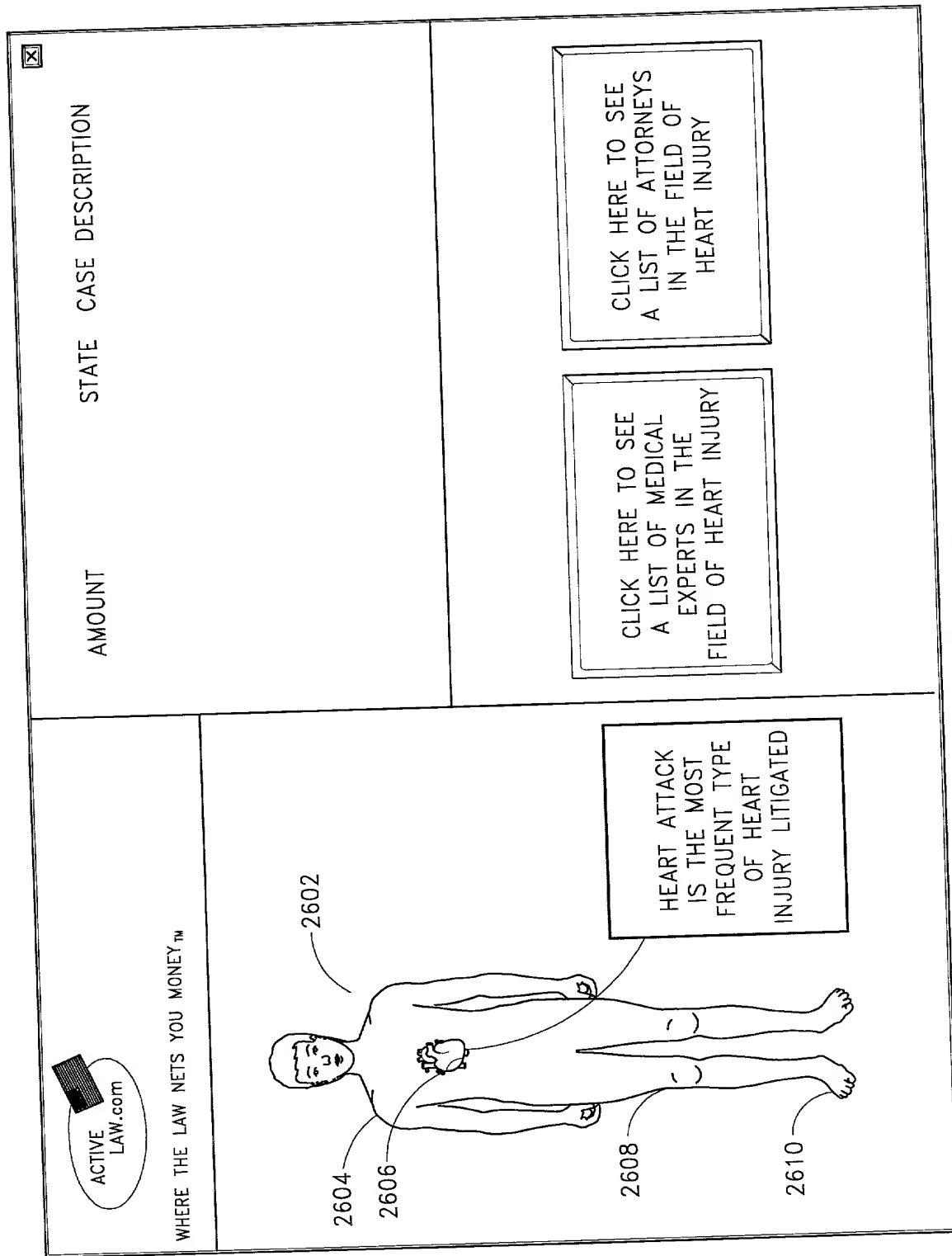


FIG. 26